

REPORT OF RECEIPTS AND DISBURSEMENTS
 BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

1 / 13

1. NAME OF COMMITTEE (in full) BROWNBAC FOR PRESIDENT INC		2. IDENTIFICATION NUMBER C00430694
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported PO BOX 2008 2436 SW CAMELOT PL		
CITY, STATE, and ZIP CODE TOPEKA KS 66601		3. IS THIS REPORT FOR : <input type="checkbox"/> Primary <input type="checkbox"/> General

4. TYPE OF REPORT (Check here if this is a Termination Report.)

<input type="checkbox"/> April 15 Quarterly Report <input type="checkbox"/> July 15 Quarterly Report <input type="checkbox"/> October 15 Quarterly Report <input type="checkbox"/> January 31 Year End Report	<p>Monthly Report Due On:</p> <table style="width:100%;"> <tr> <td><input type="checkbox"/> February 20</td> <td><input type="checkbox"/> June 20</td> <td><input type="checkbox"/> October 20</td> </tr> <tr> <td><input checked="" type="checkbox"/> March 20</td> <td><input type="checkbox"/> July 20</td> <td><input type="checkbox"/> November 20</td> </tr> <tr> <td><input type="checkbox"/> April 20</td> <td><input type="checkbox"/> August 20</td> <td><input type="checkbox"/> December 20</td> </tr> <tr> <td><input type="checkbox"/> May 20</td> <td><input type="checkbox"/> September 20</td> <td><input type="checkbox"/> January 31</td> </tr> </table> <input type="checkbox"/> Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____ <input type="checkbox"/> Thirtieth day report following the General Election on _____ on _____	<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input type="checkbox"/> October 20	<input checked="" type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20	<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20	<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31
<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input type="checkbox"/> October 20											
<input checked="" type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20											
<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20											
<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31											

IS THIS REPORT AN AMENDMENT YES NO

5. COVERING PERIOD	FROM 02/01/2008	THROUGH 02/29/2008
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SUMMARY		
6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD	8055.05	
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2)	23292.39	
8. SUBTOTAL (Lines 6 and 7)	31347.44	
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	29621.06	
10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8)	1726.38	
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	0.00	
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	34811.52	
13. EXPENDITURES SUBJECT TO LIMITATION	4207749.16	
NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES		
14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2)	3580597.17	
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2)	4207749.16	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.

Type or Print Name of Treasurer T.C. Anderson	Date 06/29/2009
Signature of Treasurer	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of FEC FORM 3P are obsolete and should no longer be used.

A. Form/Schedule : **F3PA**

Transaction ID :

This amended report is being filed to reflect the debt to Martin Gillespie which is more fully explained in the memo attached to our amended January 31, 2008, year-end report. T.C. Anderson, Treasurer.

DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS

(PAGE 2, FEC FORM 3P)

Name of committee (in full) BROWNBACK FOR PRESIDENT INC	Report Covering the Period	
	From: 02/01/2008	To: 02/29/2008
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM :		
(a) Individuals/Persons Other Than Political Committees	0.00	3603905.17
(b) Political Party Committees	0.00	300.00
(c) Other Political Committees	0.00	49435.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))	0.00	3653640.17
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	575000.00
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate	0.00	0.00
(b) Other Loans	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	0.00	0.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :		
(a) Operating	5081.74	125262.93
(b) Fundraising	0.00	0.00
(c) Legal and Accounting	0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))	5081.74	125262.93
21. OTHER RECEIPTS (Dividend, Interest, etc.)	18210.65	54032.94
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	23292.39	4407936.04
II. DISBURSEMENTS		
23. OPERATING EXPENDITURES	29621.06	4333012.09
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS	0.00	0.00
27. LOAN REPAYMENTS MADE :		
(a) Repayment of Loans made or Guaranteed by Candidate	0.00	0.00
(b) Other Repayments	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO :		
(a) Individuals/Persons Other Than Political Committees	0.00	73043.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	0.00	73043.00
29. OTHER DISBURSEMENTS	0.00	97.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	29621.06	4406152.09
III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)		
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	0.00	

ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE 4 / 13
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)
 (PAGE 3, FEC FORM 3P)

1. NAME OF COMMITTEE (in full)

BROWNBACK FOR PRESIDENT INC

ADDRESS (number and street)

PO BOX 2008
2436 SW CAMELOT PL

CITY, STATE, and ZIP CODE

TOPEKA KS 66601

2. IDENTIFICATION NUMBER

C00430694

ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	0.00
Arizona	0.00	0.00	New Hampshire	0.00	0.00
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	0.00	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	0.00
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	0.00	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	0.00	Washington	0.00	0.00
Massachusetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			TOTALS	0.00	0.00

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5 / 13
	(check only one)	
<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b
<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a
<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
BROWBACK FOR PRESIDENT INC

A.	Full Name (Last, First, Middle Initial) Travelers Property Casualty	Date of Receipt
	Mailing Address P.O. Box 42021	<input type="text" value="02"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City State Zip Code Hazelwood MO 63042-1021	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<input type="text" value="2840.00"/>
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Overpayment of worker's comp i Election Cycle-to-Date ▼ <input type="text" value="2840.00"/>
		Transaction ID: SA20A.4938

B.	Full Name (Last, First, Middle Initial) Verizon	Date of Receipt
	Mailing Address 3011 Hungary Springs Road 4th Floor	<input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>
	City State Zip Code Richmond VA 23228	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<input type="text" value="2084.70"/>
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund of telephone depos- it Election Cycle-to-Date ▼ <input type="text" value="3134.90"/>
		Transaction ID: SA20A.4939

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="4924.70"/>
TOTAL This Period (last page this line number only)	<input type="text" value="4924.70"/>

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 13
	(check only one)
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input type="checkbox"/> 17a <input type="checkbox"/> 19b
<input type="checkbox"/> 17b <input type="checkbox"/> 20a	<input type="checkbox"/> 17c <input type="checkbox"/> 20b
<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 18 <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
BROWBACK FOR PRESIDENT INC

A. Full Name (Last, First, Middle Initial) Nova List Company		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 8	
Mailing Address Suite 450		Amount of Each Receipt this Period 7129.49	
City Herndon	State VA	Zip Code 20171	Income from mailing list renta
FEC ID number of contributing federal political committee.		Election Cycle-to-Date ▼ 39645.52	
Name of Employer		Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SA21.4940	

B. Full Name (Last, First, Middle Initial) Nova List Company		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8	
Mailing Address Suite 450		Amount of Each Receipt this Period 11081.16	
City Herndon	State VA	Zip Code 20171	Mail list rental income
FEC ID number of contributing federal political committee.		Election Cycle-to-Date ▼ 50726.68	
Name of Employer		Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SA21.4954	

SUBTOTAL of Receipts This Page (optional)	▶	18210.65
TOTAL This Period (last page this line number only)	▶	18210.65

Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
BROWBACK FOR PRESIDENT INC

A.	Full Name (Last, First, Middle Initial) ADP EasyPay Mailing Address 100 Northwest Pt. Blvd. City Elk Grove Village State IL Zip Code 60007 Purpose of Disbursement Payroll fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4941 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 4 / 2 0 0 8 Amount of Each Disbursement this Period 56.50 Category/Type
B.	Full Name (Last, First, Middle Initial) ADP EasyPay Mailing Address 100 Northwest Pt. Blvd. City Elk Grove Village State IL Zip Code 60007 Purpose of Disbursement Payroll fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4942 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 8 Amount of Each Disbursement this Period 24.00 Category/Type
C.	Full Name (Last, First, Middle Initial) ADP EasyPay Mailing Address 100 Northwest Pt. Blvd. City Elk Grove Village State IL Zip Code 60007 Purpose of Disbursement Payroll Taxes due October 2007 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5037 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 8 Amount of Each Disbursement this Period 3857.45 101 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

3937.95

TOTAL This Period (last page this line number only) ▶

Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
BROWBACK FOR PRESIDENT INC

A.	Full Name (Last, First, Middle Initial) AT&T Mailing Address P.O. Box 930170 City Dallas State TX Zip Code 75393-0170 Purpose of Disbursement Telephone service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4945 Date of Disbursement 02 / 22 / 2008 Amount of Each Disbursement this Period 42.23 Category/Type
B.	Full Name (Last, First, Middle Initial) Card Services Mailing Address PO Box 219736 City Kansas City State MO Zip Code 64121-9736 Purpose of Disbursement Credit card payment-SS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4946 Date of Disbursement 02 / 22 / 2008 Amount of Each Disbursement this Period 79.92 Category/Type
C.	Full Name (Last, First, Middle Initial) Cash Vault Mailing Address Government Office Complex City Washington State DC Zip Code 20004 Purpose of Disbursement Credit card expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4947 Date of Disbursement 01 / 24 / 2008 Amount of Each Disbursement this Period 79.92 Category/Type [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	122.15
TOTAL This Period (last page this line number only) ▶	

Schedule B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
BROWBACK FOR PRESIDENT INC

A.	Full Name (Last, First, Middle Initial) Cash Vault Mailing Address Government Office Complex City Washington State DC Zip Code 20004 Purpose of Disbursement Credit card expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4961 Date of Disbursement 01 / 24 / 2008 Amount of Each Disbursement this Period 79.92 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) HSP Direct Mailing Address 13755 Sunrise Valley Dr. Suite 450 City Herndon State VA Zip Code 20171 Purpose of Disbursement Web Fundraising by SMARTech Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4962 Date of Disbursement 02 / 29 / 2008 Amount of Each Disbursement this Period 3257.98
C.	Full Name (Last, First, Middle Initial) HSP Direct Mailing Address 13755 Sunrise Valley Dr. Suite 450 City Herndon State VA Zip Code 20171 Purpose of Disbursement Direct Mail Piece Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5036 Date of Disbursement 02 / 29 / 2008 Amount of Each Disbursement this Period 6619.04

SUBTOTAL of Disbursements This Page (optional) ▶

9877.02

TOTAL This Period (last page this line number only) ▶

**Schedule B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 / 13

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
BROWBACK FOR PRESIDENT INC

A.	Full Name (Last, First, Middle Initial) Sunrise Data Services	Transaction ID: SB23.5038 Date of Disbursement
	Mailing Address 13755 Sunrise Valley Drive Suite 450	<input type="text" value="02"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City Herndon State VA Zip Code 20171	Amount of Each Disbursement this Period
	Purpose of Disbursement Data Services Candidate Name	<input type="text" value="1204.14"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="101"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Rob Wasinger	Transaction ID: SB23.5035 Date of Disbursement
	Mailing Address 10638 Timberidge Rd.	<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City Fairfax Station State VA Zip Code 22039-2406	Amount of Each Disbursement this Period
	Purpose of Disbursement Salary due October 2007 Candidate Name	<input type="text" value="14479.80"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="101"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="15683.94"/>
TOTAL This Period (last page this line number only)	<input type="text" value="29621.06"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 11 12

NAME OF COMMITTEE (In Full)
 BROWBACK FOR PRESIDENT INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ADP EasyPay			Nature of Debt (Purpose): Payroll taxes due for October
Mailing Address 100 Northwest Pt. Blvd.			
City Elk Grove Village	State IL	ZIP Code 60007	

Outstanding Balance Beginning This Period <input type="text" value="3857.45"/>		Transaction ID: SD12.5011	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3857.45"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Department of the Treasury			Nature of Debt (Purpose): 2007 Fed. Corporate Tax
Mailing Address Internal Revenue Service Center			
City Ogden	State UT	ZIP Code 84201-0001	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD12.5018	
Amount Incurred This Period <input type="text" value="1417.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1417.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Martin J Gillespie			Nature of Debt (Purpose): Buses & printing for Ames & Extern expen
Mailing Address 124 Harvard Street			
City Alexandria	State VA	ZIP Code 22314-2713	

Outstanding Balance Beginning This Period <input type="text" value="33012.52"/>		Transaction ID: SD12.4998	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="33012.52"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="34429.52"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 12 / 13	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 11 <input checked="" type="checkbox"/> 12

NAME OF COMMITTEE (In Full)
 BROWNBAC FOR PRESIDENT INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor HSP Direct	Nature of Debt (Purpose): Direct Mail Piece Expenses
Mailing Address 13755 Sunrise Valley Dr. Suite 450	
City State ZIP Code Herndon VA 20171	

Outstanding Balance Beginning This Period 6619.04	Transaction ID: SD12.5014	
Amount Incurred This Period 0.00	Payment This Period 6619.04	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kansas Corporate Income Tax	Nature of Debt (Purpose): 2007 State Income Tax
Mailing Address 915 SW Harrison St.	
City State ZIP Code Topeka KS 66699-0001	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD12.5019	
Amount Incurred This Period 382.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 382.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sunrise Data Services	Nature of Debt (Purpose): Data Services
Mailing Address 13755 Sunrise Valley Drive Suite 450	
City State ZIP Code Herndon VA 20171	

Outstanding Balance Beginning This Period 1204.14	Transaction ID: SD12.5013	
Amount Incurred This Period 0.00	Payment This Period 1204.14	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	▶	382.00
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Schedule D-P
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 13 / 13	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 11 <input checked="" type="checkbox"/> 12

NAME OF COMMITTEE (In Full)
 BROWNBACK FOR PRESIDENT INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Rob Wasinger			Nature of Debt (Purpose): Salary due October 5, 2007
Mailing Address 10638 Timberidge Rd.			
City Fairfax Station	State VA	ZIP Code 22039-2406	

Outstanding Balance Beginning This Period		Transaction ID: SD12.5016	
14479.80			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	14479.80	0.00	

1) SUBTOTALS This Period This Page (optional).....	0.00
2) TOTALS This Period (last page this line number only).....	34811.52
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	34811.52